

K05 3368

510(k) SUMMARY

MAR 29 2006

DENTSPLY International
Susquehanna Commerce Center West
221 West Philadelphia Street, Suite 60
York, PA 17405-0872

CONTACT: Helen Lewis

DATE PREPARED: December 2, 2005

TRADE OR PROPRIETARY NAME: Interproximal Reduction System

CLASSIFICATION NAME: Dental Handpiece and Accessories (21 CFR, Part 872.4200)

PREDICATE DEVICES: Synea-LS Low Speed Handpiece (K993526)
W&H Air Motor A25 (K944711)

DEVICE DESCRIPTION:

The Interproximal Reduction System handpiece includes an air-driven low-speed motor and a contra-angle integrated with the head. It is used with the abrasive strips for interproximal reduction/stripping, polishing, or preparation of tooth for placement of orthodontic appliances (aligners, brackets, retainers, etc.)

INTENDED USE:

The Interproximal Reduction System is intended for use as a method of achieving interproximal reduction of teeth.

TECHNOLOGICAL CHARACTERISTICS:

All of the components found in the Interproximal Reduction System have been used in legally marketed devices and were found safe for dental use. We believe that the prior use of the components in legally marketed predicate devices and test results support the safety and effectiveness of the Interproximal Reduction System for the indicated uses.



DEPARTMENT OF HEALTH & HUMAN SERVICES

Public Health Service

MAR 29 2006

Food and Drug Administration
9200 Corporate Boulevard
Rockville MD 20850

DENTSPLY International
Ms. Helen Lewis
Director of Corporate Compliance and Regulatory Affairs
Susquehanna Commerce Center West
221 West Philadelphia Street, Suite 60
York, Pennsylvania 17404

Re: K053368
Trade/Device Name: Interproximal Reduction System
Regulation Number: 872.4200
Regulation Name: Dental Handpiece and Accessories
Regulatory Class: I
Product Code: EFB, EGS
Dated: March 13, 2006
Received: March 13, 2006

Dear Ms. Lewis:

We have reviewed your Section 510(k) premarket notification of intent to market the device referenced above and have determined the device is substantially equivalent (for the indications for use stated in the enclosure) to legally marketed predicate devices marketed in interstate commerce prior to May 28, 1976, the enactment date of the Medical Device Amendments, or to devices that have been reclassified in accordance with the provisions of the Federal Food, Drug, and Cosmetic Act (Act) that do not require approval of a premarket approval application (PMA). You may, therefore, market the device, subject to the general controls provisions of the Act. The general controls provisions of the Act include requirements for annual registration, listing of devices, good manufacturing practice, labeling, and prohibitions against misbranding and adulteration.

If your device is classified (see above) into either class II (Special Controls) or class III (PMA), it may be subject to such additional controls. Existing major regulations affecting your device can be found in the Code of Federal Regulations, Title 21, Parts 800 to 898. In addition, FDA may publish further announcements concerning your device in the Federal Register.

Please be advised that FDA's issuance of a substantial equivalence determination does not mean that FDA has made a determination that your device complies with other requirements of the Act or any Federal statutes and regulations administered by other Federal agencies. You must comply with all the Act's requirements, including, but not limited to: registration and listing (21 CFR Part 807); labeling (21 CFR Part 801); good manufacturing practice requirements as set forth in the quality systems (QS) regulation (21 CFR Part 820); and if applicable, the electronic product radiation control provisions (Sections 531-542 of the Act); 21 CFR 1000-1050.

This letter will allow you to begin marketing your device as described in your Section 510(k) premarket notification. The FDA finding of substantial equivalence of your device to a legally marketed predicate device results in a classification for your device and thus, permits your device to proceed to the market.

If you desire specific advice for your device on our labeling regulation (21 CFR Part 801), please contact the Office of Compliance at (240) 276-0115. Also, please note the regulation entitled, "Misbranding by reference to premarket notification" (21CFR Part 807.97). You may obtain other general information on your responsibilities under the Act from the Division of Small Manufacturers, International and Consumer Assistance at its toll-free number (800) 638-2041 or (301) 443-6597 or at its Internet address <http://www.fda.gov/cdrh/industry/support/index.html>.

Sincerely yours,

A handwritten signature in black ink, appearing to read 'Chiu Lin', with a stylized flourish at the end.

Chiu Lin, Ph.D.

Director

Division of Anesthesiology, General Hospital,

Infection Control and Dental Devices

Office of Device Evaluation

Center for Devices and

Radiological Health

Enclosure

INDICATIONS FOR USE

510(K) Number (if known): K053368

Device Name: **Interproximal Reduction System**

Indications for Use:

The Interproximal Reduction System is indicated as a method for achieving interproximal reduction of teeth.

Prescription Use X
(Part 21 CFR 801 Subpart D)

AND/OR

Over-The-Counter Use _____
(21 CFR 801 Subpart C)

(PLEASE DO NOT WRITE BELOW THIS LINE—CONTINUE ON ANOTHER PAGE IF NEEDED)

Concurrence of CDRH, Office of Device Evaluation (ODE)

Susan Rimmer
(Division Sign-Off)
Division of Anesthesiology, General Hospital,
Infection Control, Dental Services

510(k) Number: K053368